PART B - FEE(S) TRANSMITTAL

omplete and strict this form, together with applicable fee(s), to: Mail NOV 1 5 2004

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated that so corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

08/11/2004

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP Seventh Floor 12400 Wilshire Boulevard Los Angeles, CA 90025-1026

SMALL ENTITY

11/16/2004 DEMMANU2 00000124 10091787

01 FC:1501 02 FC:8001

ADDIN TVDE

1370.00 OP

30.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

| Connie Tha | (Depositor's name) | | |
|------------|--------------------|-----------------|--|
| Connie | Theren | (Signature | |
| November 1 | 0 | (Date | |
| COR | ATTORNEY DOCKET NO | CONFIRMATION NO | |

TOTAL FEE(S) DUE

DATE DUE

CONFIRMATION NO FIRST NAMED INVENTOR APPLICATION NO. FILING DATE ATTORNEY DOCKET NO. | Vijay K. Seshadri 02986.P013 8952 10/091,787 03/04/2002

TITLE OF INVENTION: METHOD AND APPARATUS FOR RESETABLE MEMORY AND DESIGN APPROACH FOR SAME

ISSUE FEE

| ALIEN. TILE | SMACE ENTITI | 1000211 | | 102210111101111 | | (_, | |
|---|---|----------------|---|---|------------|----------------|---------------------------------|
| nonprovisional | NO | \$1330 | | \$0 | \$1 | 1330 | 11/12/2004 |
| EXA | MINER | ART UNI | īT | CLASS-SUBCLASS |] | | |
| NGUYE | N, VIET Q | 2818 | | 365-189020 | _ | | |
| CFR 1.363). ☐ Change of correspond Address form PTO/SB/1 | ce address or indication of "Fedence address (or Change of C 122) attached. tion (or "Fee Address" Indicat or more recent) attached. Use | Correspondence | (1) the r or agents (2) the n registere 2 registe | rinting on the patent front page, linames of up to 3 registered paters OR, alternatively, name of a single firm (having as add attorney or agent) and the namered patent attorneys or agents. If on name will be printed. | a member a | 1_BLAKETTAYLOI | LY, SOKOLOFF, R & ZAFMAN LLP |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

PUBLICATION FEE

Symplicity, Inc.

Sunnyvale, California

| Please check the appropriate assignee category or categories (will 4a. The following fee(s) are enclosed: | ot be printed on the patent); undividual corporation or other private group entity 4b. Payment of Fee(s): | government | | | | | |
|---|---|------------|--|--|--|--|--|
| ✓ Issue Fee | A check in the amount of the fee(s) is enclosed. | | | | | | |
| ☐ Publication Fee (No small entity discount permitted) | ☐ Payment by credit card. Form PTO-2038 is attached. | | | | | | |
| Advance Order - # of Copies ten (10) | The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2666 (enclose an extra copy of this form). | | | | | | |

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

□ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

(Date) (Authorized Signature)

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandra, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandra Virginia 22311-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.